MPSON BASEBALL CAMPS

T SIMPSON COLLEGE | INDIANOLA, IOWA

## **Holiday Camp**

Infield Defense Camp, Session I, 10:00am-Noon- In this camp, you will perform the same footwork, fielding, and throwing drills our players perform on a daily basis. Coaches will provide hands on coaching instruction to help develop your skills as a complete infielder.
Hitting Camp, Session II, 12:30pm-2:30pm- This camp will focus on all aspects of hitting, including, but not limited to: mechanical analysis and training, work on timing of different pitches and location, training bat speed, mental aspect of hitting, making adjustments, and small ball.
Pitching & Catching Camp, Session III, 3:00pm-5:00pm- This camp will focus on the fundamentals of two of the most important positions in baseball. Pitchers will learn how to be athletic within proper pitching mechanics, efficient arm paths, and put through competitive drills.
Catchers will learn fundamentals in their stance, receiving, blocking, throwing, and leadership characteristics of being a captain behind the plate.

When: Wednesday December 27 <sup>th</sup>	Who:	Junior High and High School Kids (Limit 20 per session)
Location: Cowles Fieldhouse at Simpson College	Cost:	\$30 for one session, \$50 for two sessions, or \$60 for all three sessions

How to register: Sign up online at http://www.simpsonbaseballcamps.com/

<u>OR</u> mail in the registration form below and a check to: Simpson College Baseball, 701 N C St, Indianola, IA 50125 Make checks payable to: Simpson College Baseball

If you have any questions, contact assistant coach Tyler Willis: 319-830-1945 or tyler.willis@simpson.edu

	Simpson Baseball Hitting Camp Regis	tration Form	
First Name:	Last Name:		
Address:	City:	State:	Zip:
Phone:	Alternate Phone:	Ema	il:
Date of Birth: / / C	urrent Grade: T-Shirt Size: _		
Choose Session (circle any that apply):			
Session I- Infield Camp (10:00am-Noon)	Session II- Hitting Camp (12:30pm-2:30pm)	Session III- Pitching/Catcher Camp (3:00pm-5:00pm)	
Select Position(s): 1B, 2B, 3B, SS	Select Side of Plate: Right, Left, Switch	Select Posit	ion: Pitcher or Catcher

## Waiver

I hereby authorize the staff of Simpson Baseball Camps to act for me according to their best judgment in any emergency requiring medical attention and I hereby waive and release the camp from any and all liability for any injuries or illness incurred while at camp. I have no knowledge of any physical impairment that would be affected by the above named camper's participation in the camp program, as outlined above.

I hereby give Simpson Baseball Camps permission to publish and release information about the above named minor student, including his/her photograph, to the news media. In addition, I give Simpson Baseball Camps permission to publish and copyright photographs and/or video footage of him/her and other information about him/her for any advertising and/or promotion done in any printed or electronic form. I also certify that I am the legal parent or guardian of the above named student and have full right to provide this release.

I understand and accept all of the separate event refund policies and/or waiver agreements above:

Name (or Name of Parent/Guardian if Participant is a minor):\_\_\_\_\_\_

Signature:\_\_\_\_\_ Date:\_\_\_\_\_

## **Refund Policy**

If you cancel, you will receive a full refund minus a \$20 non-refundable deposit. If we cancel camp due to low numbers, you will receive a full refund (minus the processing fee if you sign-up online)

## Medical Conditions/Special Instructions

Please list any medical conditions or special instructions the Event Administrators should be aware of for the participant:

Emergency Contact	
Name:	Relationship to Participant:
Phone:	Alternate Phone: